

Form CPF M 102: Campaign Finance Report TOWN CLERK RECEIVED Municipal Form

Office of Campaign and Political Finance

2016 JUN -2 PM 1:38

TOWN OF EAST LONGMEADOW

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates LONG Beginning Date: Jan :	n 1, 2016 Ending Date: Jun 2, 2016
Type of Report: (Check one)	-
 ⊠ 8th day preceding preliminary ∑ 8th day preceding election 	30 day after election year-end report dissolution
of any preceding premining of our day preceding election	Jo day area election year-old report dissolution
Susan J. Grimaldi	Grimaldi for EL Town Council
Candidate Full Name (if applicable)	Committee Name
Town Council, East Longmeadow	Albert Grimaldi
Office Sought and District	Name of Committee Treasurer
48 Millbrook Drive, East Longmeadow, MA 01028	48 Millbrook Drive, East Longmeadow, MA 01028
Residential Address	Committee Mailing Address
Telephone Number (optional): (413) 525-3188	Telephone Number (optional): (413) 525-3188
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	1) 650
Line 3: Subtotal (line 1 plus line 2)	650
Line 4: Total expenditures this period (page 5, lin	line 14) 642.89
Line 5: Ending Balance (line 3 minus line 4)	1.11
Line 6: Total in-kind contributions this period (pa	page 6) 132.5
Line 7: Total (all) outstanding liabilities (page 7)	7) 0
Line 8: Name of bank(s) used: Westfield Bank, Eas	ast Longmeadow, MA 01028
	nd contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: June 2, 2016
incurred any liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee OR Candidate with independent activity filing so	ing period.
I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of the	the best of my knowledge and belief, a true and complete statement of all campaign ents, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	Ode (Candidate's signature) Date: June 2, 2016

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5-1-2016	Isabella Grimaldi 135 Benton Drive, #269-A East Longmeadow, MA 01028	200	Isabella is my 93 year old mother-in-law
5-17-2016	Albert Grimaldi 48 Millbrook Drive East Longmeadow	200	East Longmeadow Retired Mail Carrier & husband of candidate, Susan J. Grimaldi
Susan J. Grimaldi, Town Council Candidate 48 Millbrook Drive East Longmeadow, MA 01028		200	Self employed Insurance Agent Grimaldi Insurance Agency
5-24-2016	Scott Grabowski 25 Greenacre Lane East Longmeadow, MA 01028	50	Self employed Furniture Refinisher Grabowski Furniture
Line 9: Total Rece	eipts over \$50 (or listed above)	650	
Line 10: Total Rec	eipts \$50 and under* (not listed above)	0	
	RECEIPTS IN THE PERIOD	650	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	(alphabetical listing required)		(for contributions of \$200 or more)
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	•] [] [
	•		
Line 9: Total Receipts	over \$50 (or listed above)		
ing 10, Total Pagainta	s \$50 and under* (not listed above)		
Line 10: Total Receipts	s \$50 and under (not fisted above)		
ine 11: TOTAL REC	· ·	, ''	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

	To Whom Paid	mittee name and a page number of		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
5-17-2016	Painted Signs, Jean Zampiceni	Baldwin Street East Longmeadow, MA 01028	Purchased 20 double sided yard signs & 5 steel stakes	239
5-6-16	Painted Signs, Jean Zampiceni	Baldwin Street East Longmeadow	Makeover 2 color pictures 16 years old added Town Council words & painted slogan	403.75
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	642.89
		Line 13: Total Expenditures \$50	0 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	642.89

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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	List of the control o			
	,			
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and t	under* (not listed above)	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD Second to be a second it was a f \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized.				

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address Description of Contribution	Value
5-15-2016	Tom O'Connor	3 Orange Street East Longmeadow, MA 01028	32.5
5-1-2016	2000 Democratic Town Committee-Willie Ferrero, Chairman	East Longmeadow, MA 01028 2 mounted color photos used in my 2000 Selectman campaign given to me 2000.	100
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			·
		Line 15: In-Kind Contributions over \$50 (or listed above)	100
		Line 16: In-Kind Contributions \$50 & under (not listed above)	32.5
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND CONTRIBUTIONS	132.5

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
		·		
	Enter on page 1 Grad 2	Line 18: TOTAL OUTSTAND	ING LIABILITIES (ALL)	